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FIRST NAMED APPLICANT

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Hua Tang

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Transform Pharmaceuticals, Inc. 29 Hartwell Avenue Lexington, MA 02421

**CONFIRMATION NO. 3947** \*OC000000015109997\* \*OC00000015109997\*

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## NOTICE REGARDING CHANGE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 12/17/2004.

• The Power of Attorney to you in this application has been revoked by the assignee who has intervened as provided by 37 CFR 3.71. Future correspondence will be mailed to the new address of record(37 CFR 1.33).

**MOLIKI I MAY** 1600 (571) 272-0540

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